

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>PURPLE PAC INC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00544569	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 01 / 19 / 2016</div> </div>	

Full Name of Payee <b>Arlington Edits</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 19 / 2016	
Mailing Address PO Box 95		Amount 251196.00	
City Alexandria	State VA	Zip Code 22313	Transaction ID : SE.4175
Purpose of Expenditure Television ad placement	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 01 / 13 / 2016	
Name of Federal Candidate RAND PAUL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: IA	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Arlington Edits</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 19 / 2016	
Mailing Address PO Box 95		Amount 17188.00	
City Alexandria	State VA	Zip Code 22313	Transaction ID : SE.4187
Purpose of Expenditure Ad production - estimate	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 01 / 19 / 2016	
Name of Federal Candidate RAND PAUL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: IA	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	268384.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Heidi Abegg

[Electronically Filed]

Date

 MM / DD / YYYY  
 04 / 14 / 2016

Signature